

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
	1								
2		1							
3		1							
4		1							
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42		1							
43		1							
44		1							
45		1							
46		1							
47		1							
48		1							
49		1							
50		1							
TOTAL IND.							14		
TOTAL DEP.							60		
TOTAL CLAIMS							71		

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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